

**BOARD OF REGISTERED NURSING**

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NURSE PRACTITIONERS AND CLINICAL NURSE SPECIALISTS IN LONG - TERM CARE SETTINGS

Nurse practitioners and clinical nurse specialists, certified by the Board of Registered Nursing, can provide comprehensive medical care to residents in long-term settings according to the standardized procedures co-developed with the physicians with whom they practice. Federal and state laws permit them to **provide alternate visits to residents in long-term care facilities after the physician makes the initial visit**. During these alternate visits they can:

- review the patient's total program of care
- write, sign, and date progress notes
- sign and date orders according to standardized procedures

Nurse practitioners and clinical nurse specialists providing these Medicare and Medi-Cal alternate visits are employed by the physician, clinic, or health plan with whom the standardized procedures are developed. They cannot be employed by the skilled nursing facility to perform alternate visits although they can be employed by or have a contract with skilled nursing facilities to provide other health-illness assessments and implement medical treatment plans per standardized procedures.

Nurse Practitioners (NPs) are registered nurses who have additional education and clinical experience in physical diagnosis, psychosocial assessment, and management of health-illness needs in a variety of practice settings. Nurse practitioners are educated in programs that meet the requirements of the Board of Registered Nursing. Most nurse practitioner programs grant a master's degree to their graduates.

Clinical Nurse Specialists (CNSs) are master's prepared registered nurses who participate in expert clinical practice, education, research, consultation, and clinical leadership.

Whenever NPs and CNSs perform functions or procedures which are considered to be the practice of medicine, i.e., diagnosing disease, prescribing medication, and penetrating or severing tissue, they are required to adhere to standardized procedures.

Standardized procedures are policies and procedures that are developed collaboratively by nursing, medicine, and administration in the organized health care setting where they will be used. This legal mechanism enables the practice of all competently prepared registered nurses to overlap the practice of medicine in California. Physician supervision is not required unless specified in a particular standardized procedure. Unless required under particular standardized procedures a physician's presence is not required when NPs and CNSs are providing their services although physician back up must be available. Physicians are not required by law to co-sign their orders although some third payment sources may require co-signing.

Some of the nursing functions NPs and CNSs commonly perform include obtaining a health history, conducting a physical examination, and ordering laboratory and radiological tests. Some of the medical functions they perform include determining a medical diagnosis, ordering medications, developing a medical treatment plan, and performing medical procedures such as lumbar puncture and bone marrow. NPs and CNSs must be identified by name in the standardized procedures.

Legal Citations

Nurse Practitioners - Business and Professions Code, Article 8, Sections 2834-2837, and California Code of Regulations, Article 8, Sections 1480-1485.

Clinical Nurse Specialists – Business and professions Code Section 2838.2

Standardized Procedures - Business and Professions Code, Chapter 6, Article 2, Section 2725(d), and California Code of Regulations, Article 7, Sections 1470-1474.

Alternate physician visits by NPs and CNSs - Federal authorization found in the Omnibus Budget Reconciliation Act (OBRA) 1990 and Section 483.40 of the Federal Rules and Regulations (Federal Register, September 28, 1991). State authorization is found in California Welfare and Institutions Code, Sections 14111 and 14111.5.